

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

it is suggested that you file petitions in county/city to facilitate the processing of the filing. If you have the number of signatures by congressional district enter district no.: \_\_\_\_\_ [optional].

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
Alan Schintz

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
3321 Garland ave

ENTER ABOVE, CITY/TOWN  
Richmond Va

ENTER ABOVE, ZIP + 4  
23222

ENTER ABOVE, OFFICE SOUGHT  
MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of Nov, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <u>Wilda Jones</u> PRINT <u>Wilda C. Jones</u>	RESIDENCE <u>1816 Powhatan St</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/1/16</u>	
2.	SIGN <u>Michelle Taylor</u> PRINT <u>Michelle Taylor</u>	RESIDENCE <u>3200 Montrose Ave</u> CITY/TOWN <u>Richmond, VA 23222</u>	<u>4/1/16</u>	
3.	SIGN <u>Elvis Green</u> PRINT <u>Elvis Green</u>	RESIDENCE <u>3500 Montrose Ave</u> CITY/TOWN <u>Richmond, VA 23222</u>	<u>4/1/16</u>	
4.	SIGN <u>Stacey Randolph</u> PRINT <u>Stacey Randolph</u>	RESIDENCE <u>821 Catherine St</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>4/1/16</u>	
5.	SIGN <u>Katy McCormack</u> PRINT <u>Katy McCormack</u>	RESIDENCE <u>2304 Parkwood Apt C</u> CITY/TOWN <u>Richmond VA 23210</u>	<u>4/1/16</u>	
6.	SIGN <u>Will Boreford</u> PRINT <u>Will Boreford</u>	RESIDENCE <u>2312 Monument Ave</u> CITY/TOWN <u>Richmond, VA 23221</u>	<u>4/1/16</u>	
7.	SIGN <u>Nikhita Jain</u> PRINT <u>Nikhita Jain</u>	RESIDENCE <u>Richmond</u> CITY/TOWN <u>243 Westhampton Way</u>	<u>4/1/16</u>	
8.	SIGN <u>Charlie Turner</u> PRINT <u>Charlie Turner</u>	RESIDENCE <u>215 N. 18th Street Apt 4</u> CITY/TOWN <u>Richmond VA 23223</u>	<u>4/1/16</u>	
9.	SIGN <u>John Williams</u> PRINT <u>John Williams</u>	RESIDENCE <u>212 S. Belmont</u> CITY/TOWN <u>Richmond</u>	<u>4/1/16</u>	
10.	SIGN <u>Travis McLean</u> PRINT <u>Travis McLean</u>	RESIDENCE <u>8001 J. P. Hall</u> CITY/TOWN <u>Richmond</u>	<u>4/1/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without do so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.

CONTINUED FROM REVERSE SIDE

CANDIDATE NAME:

Alan Schintz

OFFICE SOUGHT:

Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <i>[Signature]</i> PRINT Gregory Nowotarski	RESIDENCE 2416 West Main St. CITY/TOWN Richmond	4/1/16	
12	SIGN <i>[Signature]</i> PRINT Julius Delacruz	RESIDENCE 1425 Plum St CITY/TOWN Richmond	4/1/16	
13	SIGN <i>[Signature]</i> PRINT DAVID RIDDLEHOF	RESIDENCE 3018 NEW KENT CITY/TOWN RICHMOND, VA	4/1/16	
14	SIGN <i>[Signature]</i> PRINT Kyle Anderberg	RESIDENCE 2008 W Cary St CITY/TOWN Richmond VA	4/1/16	
15	SIGN <i>[Signature]</i> PRINT Scott Collier	RESIDENCE 8470 Wyndale Dr CITY/TOWN Mechanicsville VA	4/1/16	
16	SIGN <i>[Signature]</i> PRINT Cynthia Reyes	RESIDENCE 2129 Allwood Ave CITY/TOWN Richmond	4/1/16	
17	SIGN <i>[Signature]</i> PRINT Matthew Daniel	RESIDENCE 404 C. 123 St CITY/TOWN R VA	4/1/16	
18	SIGN <i>[Signature]</i> PRINT WELFORD SMITH T	RESIDENCE 2714 BALTIMORE ST CITY/TOWN RICHMOND, VA 23225	4-1-16	
19	SIGN <i>[Signature]</i> PRINT Terry S. Brisbane	RESIDENCE 1626 Clarendon Ave CITY/TOWN Richmond VA 23227	4-1-16	
20	SIGN <i>[Signature]</i> PRINT Aubrey Neely	RESIDENCE 1131 Eagleson CITY/TOWN Richmond, VA	4/1/16	
21	SIGN <i>[Signature]</i> PRINT Nick Brown	RESIDENCE 4 S Adams St CITY/TOWN Richmond VA 23225	4/1/16	

Commonwealth of Virginia

- AFFIDAVIT -

I, Alan Schintz, swear or affirm that (i) my full residential address is 3321 Garland in the State/Commonwealth of Virginia; (ii) I am a legal resident of the County/City/Town of Richmond; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

NOT PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

Lisa Anne Cosby  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7527182  
My Commission Expires 11/30/2018

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of April, 2016, by

Alan Schintz  
PRINT NAME OF PERSON CIRCULATING THE PETITION

NATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

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\*not included in seal/stamp.

SBE-506/521 REV 1.2013

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use separate petition forms for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in counties to facilitate the processing of the filing. If you want the number of signatures by congressional district enter district no.: \_\_\_\_\_ [optional].

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)  
Alan Schintz  
ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
3321 Garland Ave  
ENTER ABOVE, CITY/TOWN  
Richmond Va ENTER ABOVE, ZIP + 4  
23222  
ENTER ABOVE, OFFICE SOUGHT  
ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November 20 16 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
R	1.	SIGN <u>Jessica W. Kelly</u> PRINT <u>Jessica W. Kelly</u>	RESIDENCE <u>2006 Maplewood</u> CITY/TOWN <u>Richmond</u>	4/1	
R	2.	SIGN <u>Kenneth K. K. B.</u> PRINT <u>KENNETH K. K. B.</u>	RESIDENCE <u>2114 Hanover Ave</u> CITY/TOWN <u>Richmond 23220</u>	4/1	
R	3.	SIGN <u>Katherine Rivara</u> PRINT <u>Katherine Rivara</u>	RESIDENCE <u>3301 Rosewood Ave</u> CITY/TOWN <u>Richmond, VA 23221</u>	4/1	
R	4.	SIGN <u>Chris Damon</u> PRINT <u>CHRIS DAMON</u>	RESIDENCE <u>304 N. MULBERRY ST APT 1</u> CITY/TOWN <u>Richmond, VA 23220</u>	4/1	
R	5.	SIGN <u>Paul R. Hingley</u> PRINT <u>PAUL R. HINGLEY</u>	RESIDENCE <u>816 West 42nd</u> CITY/TOWN <u>Richmond, VA 23220</u>	4/1	01 April
R	6.	SIGN <u>EMMA J. E. G. W.</u> PRINT	RESIDENCE CITY/TOWN		
R	7.	SIGN <u>Gilbert Crockett</u> PRINT <u>Gilbert Crockett</u>	RESIDENCE <u>2115 Stuart Ave.</u> CITY/TOWN <u>Richmond VA 23220</u>	4/1	
R	8.	SIGN <u>Michael Gilbert</u> PRINT <u>Michael Gilbert</u>	RESIDENCE <u>2702 Northumberland Ave</u> CITY/TOWN <u>Richmond, VA 23220</u>	4/1	
R	9.	SIGN <u>Christina Sauer</u> PRINT <u>Christina Sauer</u>	RESIDENCE <u>7321 Brundidge Rd</u> CITY/TOWN <u>North Chesterfield VA 23060</u>	4/1	
R	10.	SIGN <u>Debra M. M. H. T. A.</u> PRINT <u>DEBRA M. H. T. A.</u>	RESIDENCE <u>611 St. Peter St</u> CITY/TOWN <u>Richmond, VA 23220</u>	4/1	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE S

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintz OFFICE SOUGHT: Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

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11	SIGN <u>Helen S. McIVER</u> PRINT <u>Helen S. McIVER</u>	RESIDENCE <u>3613 Seawing Ave</u> CITY/TOWN <u>Richmond, VA 23227</u>	<u>4/2/16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>4420 W. Main</u> CITY/TOWN <u>Richmond, VA</u>	<u>4-2-16</u>	
13	SIGN <u>Jim V. Reed III</u> PRINT <u>Jim V. Reed III</u>	RESIDENCE <u>3009 Grant St</u> CITY/TOWN <u>Richmond, VA 23226</u>	<u>4/2/16</u>	
14	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>401 W. 39th St</u> CITY/TOWN <u>Richmond, VA 23225</u>	<u>4/2/16</u>	
15	SIGN <u>[Signature]</u> PRINT <u>Alan Sanfratella</u>	RESIDENCE <u>2988 Park Ave</u> CITY/TOWN <u>Richmond, VA 23221</u>	<u>4/2/16</u>	
16	SIGN <u>[Signature]</u> PRINT <u>Emily Sanfratella</u>	RESIDENCE <u>2908 Park Ave.</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>4/2/16</u>	
17	SIGN <u>[Signature]</u> PRINT <u>Lexis Wurd</u>	RESIDENCE <u>1000 W. Grace Street</u> CITY/TOWN <u>Richmond VA, 23220</u>	<u>4-2-16</u>	
18	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>2000 W. Grace Street</u> CITY/TOWN <u>Richmond VA, 23220</u>	<u>4/2/16</u>	
19	SIGN <u>[Signature]</u> PRINT <u>Austin Monroes</u>	RESIDENCE <u>801 W. Franklin</u> CITY/TOWN <u>Richmond</u>	<u>4/2/16</u>	
20	SIGN <u>[Signature]</u> PRINT <u>Adelene Colbaugh</u>	RESIDENCE <u>711 W Main</u> CITY/TOWN <u>Richmond</u>	<u>4-2-16</u>	
21	SIGN <u>[Signature]</u> PRINT <u>Isaac Bannourah</u>	RESIDENCE <u>916 W Grace</u> CITY/TOWN <u>Richmond</u>	<u>Apr 2 2016</u>	

Commonwealth of Virginia - AFFIDAVIT -  
I, Alan Schintz, swear or affirm that (i) my full residential address is 3327 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

NOTARILY PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW  
Lisa Anne Cosby  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7527182  
My Commission Expires 11/30/2018

SIGNATURE OF PERSON CIRCULATING THE PETITION  
State of Virginia County/City of Richmond  
The foregoing instrument was subscribed and sworn before me this 14th day of April, 20 16, by Alan Schintz  
PRINT NAME OF PERSON CIRCULATING THE PETITION

T6425295C  
CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE  
V9  
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE  
VA  
CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

NOTICE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS: NOTARY REGISTRATION NUMBER: DATE NOTARY COMMISSION EXPIRES:  
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For a statewide office

It is suggested that you file petitions in county or city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no. (optional).

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

Alan Schintzews

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 garland ave

ENTER ABOVE, CITY/TOWN

Richmond Va 23222

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

MAVA

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

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1.	SIGN	<i>[Signature]</i>	RESIDENCE 3004 Floyd Ave	4/2/16	
	PRINT	Lyndey Ritchie	CITY/TOWN Richmond VA 23221		
2.	SIGN	<i>[Signature]</i>	RESIDENCE 2414 ROXBORO	4/2/16	
	PRINT	CHRIS BYRD	CITY/TOWN RICHMOND VA 23220		
3.	SIGN	<i>[Signature]</i>	RESIDENCE 2414 ROXBORO	4/2/16	
	PRINT	SAUL BYRD	CITY/TOWN RICHMOND VA 23220		
4.	SIGN	<i>[Signature]</i>	RESIDENCE 812 S. Loyal St	4/2/16	
	PRINT	SCOTT AUGER	CITY/TOWN Richmond VA 23220		
5.	SIGN	<i>[Signature]</i>	RESIDENCE 7060 HERBERT RD	4/2/16	
	PRINT	Michael Kelleher	CITY/TOWN R VA 23225		
6.	SIGN	<i>[Signature]</i>	RESIDENCE 808 BULL LN D	4/2/16	
	PRINT	Stephen Kuthall	CITY/TOWN Richmond VA 23225		
7.	SIGN	<i>[Signature]</i>	RESIDENCE 801 W. DAVEN	4/5/16	
	PRINT	Barbara Rose	CITY/TOWN Richmond VA		
8.	SIGN	<i>[Signature]</i>	RESIDENCE 711 W Main	4/3/16	
	PRINT	Julie Adler	CITY/TOWN Richmond VA		
9.	SIGN	<i>[Signature]</i>	RESIDENCE 3201 North Ave	4/3/16	
	PRINT	Leah MacDaniel	CITY/TOWN Richmond VA 23222		
10.	SIGN	<i>[Signature]</i>	RESIDENCE 1015 Taylor Ave	4/3/16	
	PRINT	David Phinney	CITY/TOWN Richmond 23222		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintz OFFICE SOUGHT: Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

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11	SIGN <u>[Signature]</u> PRINT <u>Michael Newbeyer</u>	RESIDENCE <u>7704 Cary Street Rd</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/3/16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>Jonathan Lewis</u>	RESIDENCE <u>3412 Stuart Ave.</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/3/16</u>	
13	SIGN <u>[Signature]</u> PRINT <u>Herdi Mangiola</u>	RESIDENCE <u>1428 W. City</u> CITY/TOWN <u>RICHMOND, VA</u>	<u>4/3/16</u>	
14	SIGN <u>[Signature]</u> PRINT <u>Lisa Perillo</u>	RESIDENCE <u>1209 Leicester Rd</u> CITY/TOWN <u>Richmond 23225</u>	<u>4/3/16</u>	
15	SIGN <u>[Signature]</u> PRINT <u>Rhonda H. Davis</u>	RESIDENCE <u>1320 Wilby St.</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/3/16</u>	
16	SIGN <u>[Signature]</u> PRINT <u>Scott Price</u>	RESIDENCE <u>3105 Ellwood Ave</u> CITY/TOWN <u>Richmond Va 23221</u>	<u>4/3/16</u>	
17	SIGN <u>[Signature]</u> PRINT <u>Amory A. Hagan</u>	RESIDENCE <u>6 W 31 ST</u> CITY/TOWN <u>RICHMOND 23225</u>	<u>4/3/16</u>	
18	SIGN <u>[Signature]</u> PRINT <u>James P. Armstrong</u>	RESIDENCE <u>1218 Wilby Rd.</u> CITY/TOWN <u>Rich VA 23227</u>	<u>4/3/16</u>	
19	SIGN <u>[Signature]</u> PRINT <u>H. L. Lee</u>	RESIDENCE <u>1818 Wilby Rd.</u> CITY/TOWN <u>Rich. Va. 23227</u>	<u>04-03-16</u>	
20	SIGN <u>[Signature]</u> PRINT <u>RICHARD TATNALL</u>	RESIDENCE <u>314 NORTH 30th ST</u> CITY/TOWN <u>RICHMOND VA 23223</u>	<u>4/3/16</u>	
21	SIGN <u>[Signature]</u> PRINT <u>RYAN WILLIAMS</u>	RESIDENCE <u>1009 FORT 12 ST. APT B</u> CITY/TOWN <u>RICHMOND, VA 23224</u>	<u>4/3/16</u>	

Commonwealth of Virginia

## - AFFIDAVIT -

I, Alan Schintz, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia; (ii) I am a legal resident of Richmond in the County/City/Town of Richmond; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

NOT PHOTOGRAPHICALLY REPRODUCIBLE

NOTARY SEAL/STAMP BELOW

List Anne Cosby  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7527192  
My Commission Expires 11/30/2018

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 10th day of April, 2016, by

Alan Schintz  
PRINT NAME OF PERSON CIRCULATING THE PETITION

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLEVANAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSECIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER7642529501143

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* OATH NOTARY COMMISSION EXPIRES\*\*

Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

If not included in seal/stamp.

SBE-506/521 REV 1.2013

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in a county to facilitate the processing of the filing. Indicate the number of signatures by congressional district enter district no. \_\_\_\_\_ (optional)

We, the qualified voters of the district in which the above candidate seeks nomination or election and of \_\_\_\_\_ signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of Nov, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA NOT MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR NO MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
R 1.	SIGN <u>Christie Wisotzki</u> PRINT <u>Christie Wisotzki</u>	RESIDENCE <u>1305 Grove</u> CITY/TOWN <u>Richmond VA</u>	<u>4/10/16</u>	
R 2.	SIGN <u>Emeline Phipps</u> PRINT <u>Emeline Phipps</u>	RESIDENCE <u>1900 Avondale</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/10/16</u>	
R 3.	SIGN <u>Meghan Lumberta</u> PRINT	RESIDENCE <u>2086 1012 West 49th St</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>4/10/16</u>	
R 4.	SIGN <u>Sarah Burke</u> PRINT <u>Sarah Burke</u>	RESIDENCE <u>6480 Birkdale Rd</u> CITY/TOWN <u>Richmond VA 23230</u>	<u>4/10/16</u>	
R 5.	SIGN <u>Nicholas Spangler</u> PRINT <u>Nicholas Spangler</u>	RESIDENCE <u>1 E Marshall St</u> CITY/TOWN <u>Richmond VA 23219</u>	<u>4/10/16</u>	
R 6.	SIGN <u>Jonathan Logue</u> PRINT <u>Jonathan Logue</u>	RESIDENCE <u>1 E Marshall St</u> CITY/TOWN <u>Richmond VA 23219</u>	<u>4/10/16</u>	
R 7.	SIGN <u>Shannon Cassano</u> PRINT <u>Shannon Cassano</u>	RESIDENCE <u>3713 Crutfield St</u> CITY/TOWN <u>Richmond VA 23225</u>	<u>4/10/16</u>	
R 8.	SIGN <u>Justin Lawrence</u> PRINT <u>Justin Lawrence</u>	RESIDENCE <u>509 N. Madison St</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>4/10/16</u>	
R 9.	SIGN <u>Johnson, Mike</u> PRINT <u>Johnson, Mike</u>	RESIDENCE <u>2209 Ral Will Rd</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>4/10/16</u>	
R 10.	SIGN <u>Clashy</u> PRINT <u>Clashy</u>	RESIDENCE <u>11 1/2 W Clay St</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>4/10/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.



CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>[Signature]</u> PRINT Kelly Wolf	RESIDENCE 10 N Auburn Ave CITY/TOWN RVA 23021	4-11-16	
12	SIGN <u>[Signature]</u> PRINT Christina Naji	RESIDENCE 4639 Kensington Ave CITY/TOWN RVA 23226	4-11-16	
13	SIGN <u>[Signature]</u> PRINT LARRY E. Flythe SR	RESIDENCE 614 Henric Blvd CITY/TOWN Rich VA 23222	4-11-16	
14	SIGN <u>[Signature]</u> PRINT Caroline Cox	RESIDENCE 430 S. Laurel St CITY/TOWN Richmond VA	4-11-16	
15	SIGN <u>[Signature]</u> PRINT John Richmond Jr	RESIDENCE 430 S Laurel St CITY/TOWN Richmond VA 23220	4-11-16	
16	SIGN <u>[Signature]</u> PRINT Brionna Nomi	RESIDENCE 1804 Seddon Rd CITY/TOWN Richmond VA 23227	4-11-16	
17	SIGN <u>[Signature]</u> PRINT MICHAEL BROTHER	RESIDENCE 1804 SEDDON RD CITY/TOWN RICHMOND VA 23227	4-11-16	
18	SIGN <u>[Signature]</u> PRINT JAY SLINGER	RESIDENCE 610 S Laurel St CITY/TOWN R V A 23220	4-11-16	
19	SIGN <u>[Signature]</u> PRINT IAN C. HESS	RESIDENCE 111 W. MARSHALL ST CITY/TOWN RVA 23220	4-11-16	
20	SIGN <u>[Signature]</u> PRINT KRISTOPHER GOAD	RESIDENCE 2608 Harbor Ave CITY/TOWN Richmond 23220	4-11-16	
21	SIGN <u>[Signature]</u> PRINT Jason Mayford	RESIDENCE 2701 East Main CITY/TOWN Richmond	4-12-16	

Commonwealth of Virginia - AFFIDAVIT -

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of VA; in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

FACE PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW  
Lisa Anne Cosby  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7527182  
Commission Expires 11/30/2018

SIGNATURE OF PERSON CIRCULATING THE PETITION  
State of Virginia County/City of Richmond  
The foregoing instrument was subscribed and sworn before me this 12th day of April, 20 16, by Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

764252450  
CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE  
VA  
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE  
193  
CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.



K

# COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in counties to facilitate the processing of the filing. If you track the number of signatures by congressional district, enter district no. (optional).

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)

Alan Schurtz

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland Ave

ENTER ABOVE, CITY/TOWN

Richmond Va 23122

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Alan Schurtz signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the (check only one)

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of Nov, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is neither a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (SEE 2014)
P	1.	SIGN <u>[Signature]</u> PRINT <u>Sandra P. Stiles</u>	RESIDENCE <u>603 Chamberlayne</u> CITY/TOWN <u>Richmond, VA</u>	<u>3/31</u> <u>2016</u>	
P	2.	SIGN <u>[Signature]</u> PRINT <u>Tracy K. Jones</u>	RESIDENCE <u>1516 Cedarwood</u> CITY/TOWN <u>Richmond, VA</u>	<u>3/31</u>	
P	3.	SIGN <u>[Signature]</u> PRINT <u>John K. Knapp</u>	RESIDENCE <u>1601 Confederate</u> CITY/TOWN <u>Richmond VA</u>	<u>3/31</u>	
P	4.	SIGN <u>[Signature]</u> PRINT <u>MATTHEW ZOLLER</u>	RESIDENCE <u>3150 Floyd Ave</u> CITY/TOWN	<u>3/31</u>	
P	5.	SIGN <u>[Signature]</u> PRINT <u>Joseph A. DeLeon</u>	RESIDENCE <u>Richmond VA</u> CITY/TOWN <u>319 A. N. Robinson</u>	<u>3/31</u>	
P	6.	SIGN <u>[Signature]</u> PRINT <u>Ronald W. Rogers</u>	RESIDENCE <u>Richmond VA</u> CITY/TOWN <u>325 S. Cherry St.</u>	<u>3/31</u>	
P	7.	SIGN <u>[Signature]</u> PRINT <u>Sarah Mann</u>	RESIDENCE <u>6229 Debora Dr.</u> CITY/TOWN <u>RVA</u>	<u>3/31</u>	
P	8.	SIGN <u>[Signature]</u> PRINT <u>Sheila Jones</u>	RESIDENCE <u>3606 Chamberlayne</u> CITY/TOWN <u>RVA</u>	<u>3/31</u>	
P	9.	SIGN <u>[Signature]</u> PRINT <u>Hugh Jones</u>	RESIDENCE <u>1808 Powhatan</u> CITY/TOWN <u>Richmond VA</u>	<u>3/31</u>	
P	10.	SIGN <u>[Signature]</u> PRINT <u>Anton Fred</u>	RESIDENCE <u>305 South</u> CITY/TOWN <u>Richmond VA</u>	<u>3/31</u>	

(CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE)

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CONTINUED FROM REVERSE SIDE

CANDIDATE NAME:

Alan Schatzky

OFFICE SOUGHT:

MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <i>[Signature]</i> PRINT <i>[Signature]</i>	RESIDENCE 1162 Rob. Wood St CITY/TOWN Ches. Office VA 23032		
12	SIGN <i>[Signature]</i> PRINT <i>[Signature]</i>	RESIDENCE CITY/TOWN		
13	SIGN <i>[Signature]</i> PRINT <i>[Signature]</i>	RESIDENCE CITY/TOWN		
14	SIGN <i>Taimur Mahmood</i> PRINT <i>Taimur Mahmood</i>	RESIDENCE 300 West Franklin St CITY/TOWN Richmond, VA 23220	4/1/16	
15	SIGN <i>Carol R. Werholf</i> PRINT <i>Carol R. Werholf</i>	RESIDENCE 3015 New Kent Ave CITY/TOWN Rich. Va. 23225	4/1/16	
16	SIGN <i>Andrea Halco</i> PRINT <i>Andrea Halco</i>	RESIDENCE 112 W. 29th St CITY/TOWN Richmond, 23225	4-1-16	
17	SIGN <i>Brianne McCarthy</i> PRINT <i>Brianne McCarthy</i>	RESIDENCE 8470 Wyndale Dr CITY/TOWN Mechanicsville, VA	4/1/16	
18	SIGN <i>José María Gálvez</i> PRINT <i>José M. Gálvez</i>	RESIDENCE 3220 Barton Ave CITY/TOWN Richmond VA	04/01/16	
19	SIGN <i>Dennis H. Harvey</i> PRINT <i>Dennis H. Harvey</i>	RESIDENCE 316 W. 29 St. CITY/TOWN Richmond, VA	4/1/16	
20	SIGN <i>[Signature]</i> PRINT <i>[Signature]</i>	RESIDENCE 1511 W. 29th Ave CITY/TOWN Richmond VA	4/1/16	
21	SIGN <i>[Signature]</i> PRINT <i>Daniel Brisbon</i>	RESIDENCE 1635 Claremont Ave CITY/TOWN Richmond Va	4/1/16	

Commonwealth of Virginia

- AFFIDAVIT -

23227

T6457950

I, Alan Schatzky, swear or affirm that (i) my full residential address is 3321 Garland in the State/Commonwealth of VA; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

NOT REPRODUCIBLE  
NOTARIAL SEAL  
Commonwealth of Virginia  
Reg. #7527182  
Commission Expires 11/30/2018

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn to before me this  
18th day of April, 2016, by  
Alan Schatzky

PRINT NAME OF PERSON CIRCULATING THE PETITION

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

NOTARY PUBLIC OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

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not included in seal/stamp.

SEE-508/521 REV 1.2013

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: \_\_\_\_\_ (optional).

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

Alan Schintz

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland Ave

ENTER ABOVE, CITY/TOWN

Richmond Va 23222

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond Va signed hereunder on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
	1.	SIGN <u>[Signature]</u> PRINT	RESIDENCE CITY/TOWN		
	2.	SIGN <u>[Signature]</u> PRINT <u>JOHN MOSER</u>	RESIDENCE <u>1409 WESTBROOK AVE</u> CITY/TOWN <u>RICHMOND VA 23222</u>	<u>4/1/16</u>	
	3.	SIGN <u>[Signature]</u> PRINT <u>Talia Moser</u>	RESIDENCE <u>1409 Westbrook Ave</u> CITY/TOWN <u>Richmond Va</u>	<u>4/1/16</u>	
	4.	SIGN <u>[Signature]</u> PRINT <u>Meredith Salley</u>	RESIDENCE <u>503 Strawberry St #5</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>4/1/16</u>	
	5.	SIGN <u>[Signature]</u> PRINT <u>James Hill</u>	RESIDENCE <u>503 STRAWBERRY ST #5</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>4/1/16</u>	
	6.	SIGN <u>[Signature]</u> PRINT <u>Shannon Keeter</u>	RESIDENCE <u>1443 Brownleaf Dr</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/1/16</u>	
	7.	SIGN <u>[Signature]</u> PRINT <u>Taylor-Leigh Adams</u>	RESIDENCE <u>415 E Grove St</u> CITY/TOWN <u>Richmond VA</u>	<u>4/1/16</u>	
	8.	SIGN <u>[Signature]</u> PRINT <u>Arshad Green</u>	RESIDENCE <u>3102 Kensington Ave</u> CITY/TOWN <u>Richmond, VA 23222</u>	<u>4/1/16</u>	
	9.	SIGN <u>[Signature]</u> PRINT <u>Day Wright</u>	RESIDENCE <u>713 Catherine St</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/1/16</u>	
	10.	SIGN <u>[Signature]</u> PRINT <u>Arshan Bardsheh</u>	RESIDENCE <u>1604 Grove Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/1/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT C

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CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintz OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY
11	SIGN <u>[Signature]</u> PRINT <u>Gregory K. [unclear]</u>	RESIDENCE <u>113 Churchland Ave</u> CITY/TOWN <u>Rich VA 23231</u>	<u>4/10/16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>[unclear]</u>	RESIDENCE <u>317 West [unclear]</u> CITY/TOWN <u>Rich VA</u>	<u>4/12/16</u>	
13	SIGN <u>[Signature]</u> PRINT <u>RYAN HESS</u>	RESIDENCE <u>16 N MEADOW ST.</u> CITY/TOWN <u>RICHMOND</u>	<u>4/12/16</u>	
14	SIGN <u>[Signature]</u> PRINT <u>Peter Lewis</u>	RESIDENCE <u>1701 Grove St.</u> CITY/TOWN <u>Richmond</u>	<u>4/2/16</u>	
15	SIGN <u>[Signature]</u> PRINT <u>Josh Small</u>	RESIDENCE <u>5316 Salem St</u> CITY/TOWN <u>Richmond</u>	<u>4/2/16</u>	
16	SIGN <u>[Signature]</u> PRINT <u>[unclear]</u>	RESIDENCE <u>[unclear]</u> CITY/TOWN <u>[unclear]</u>	<u>[unclear]</u>	
17	SIGN <u>[Signature]</u> PRINT <u>[unclear]</u>	RESIDENCE <u>2370 [unclear]</u> CITY/TOWN <u>[unclear]</u>	<u>4-2-16</u>	
18	SIGN <u>[Signature]</u> PRINT <u>John's Teeze</u>	RESIDENCE <u>5858 Broadview Pl</u> CITY/TOWN <u>Richmond VA</u>	<u>4-2-16</u>	
19	SIGN <u>[Signature]</u> PRINT <u>Samuel S. Forrest</u>	RESIDENCE <u>409 HAWCROFT</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>4/2/16</u>	
20	SIGN <u>[Signature]</u> PRINT <u>James Slade</u>	RESIDENCE <u>1130 Eggleston St</u> CITY/TOWN <u>Richmond VA</u>	<u>4/2/2016</u>	
21	SIGN <u>[Signature]</u> PRINT <u>Robin Silverman</u>	RESIDENCE <u>1126 Eggleston St</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/2/16</u>	

Commonwealth of Virginia

- AFFIDAVIT -

1950

I, Alan Schintz, swear or affirm that (i) my full residential address is 3321 Gaudin Ave in the State/Commonwealth of VA; (ii) I am a legal resident of the County/City/Town of Richmond; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
VA

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER  
1195

PLACE PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

Lisa Anne Cosby  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7527182  
My Commission Expires 11/30/2018

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of VIRGINIA County/City of Richmond

The foregoing instrument was subscribed and sworn before me this  
12th day of April, 2016, by  
Alan Schintz

PRINT NAME OF PERSON CIRCULATING THE PETITION

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

NOTARY REGISTRATION NUMBER\*\*

DATE NOTARY COMMISSION EXPIRES\*\*

Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate tracking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

\* If not included in seal/stamp.

SBE-506/521 REV 1.2013

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidates)

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in a county or city to facilitate the processing of filing.

For a statewide office

It is suggested that you file petitions in county to facilitate the processing of the filing. If you file the number of signatures by congressional district enter district no. (optional)

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

Alan Schintz

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland Ave

ENTER ABOVE, CITY/TOWN

Richmond Va 23221

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the (check only one)

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is having a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, IS NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS SO
P 1.	SIGN		RESIDENCE 1491 N. Main St		
	PRINT	James McKinnon	CITY/TOWN Richmond, Va	3/22/16	
P 2.	SIGN		RESIDENCE 2008 Park Ave		
	PRINT	Richard Watkins	CITY/TOWN Richmond, VA	3/25/16	
P 3.	SIGN		RESIDENCE 1016 N. Plum St		
	PRINT	Sandra Taylor	CITY/TOWN Richmond, VA	3/28/16	
P 4.	SIGN		RESIDENCE 209 N. 3RD ST		
	PRINT	ISAAC ALVIN	CITY/TOWN RICHMOND VA	3/28/16	
P 5.	SIGN		RESIDENCE 714 Holly St		
	PRINT	Phaedra Rose	CITY/TOWN RVA	3/28	
P 6.	SIGN		RESIDENCE 519 N. 1st St		
	PRINT	Constance Costa	CITY/TOWN Richmond VA 23209	3/28	
P 7.	SIGN		RESIDENCE 15 E. Clay St.		
	PRINT	Kathryn Foster	CITY/TOWN Richmond VA	3/28/16	
P 8.	SIGN		RESIDENCE 500 Hull St (1st fl)		
	PRINT	Laine Myers	CITY/TOWN RVA	3/28/16	
P 9.	SIGN		RESIDENCE 2104 Lewis Ave		
	PRINT	George Lydo	CITY/TOWN Richmond VA	3/28/16	
P 10.	SIGN		RESIDENCE 2517 E. Grace St.		
	PRINT	Chris Wye	CITY/TOWN Richmond VA 23223	3/28/16	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzus OFFICE SOUGHT: Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
11	SIGN <u>[Signature]</u> PRINT <u>GILBERT COCKETT</u>	RESIDENCE <u>2111 Oakwood Ln.</u> CITY/TOWN <u>Richmond VA 23228</u>	<u>3/28/16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>TYLER BEALL</u>	RESIDENCE <u>1426 W CLAY ST</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>3/28</u>	
13	SIGN <u>[Signature]</u> PRINT <u>Daniel Ravenal</u>	RESIDENCE <u>6 N Dorey Ave</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>3/28/16</u>	
14	SIGN <u>[Signature]</u> PRINT <u>William Rigby</u>	RESIDENCE <u>3313 SUFFOLK RD</u> CITY/TOWN <u>Richmond VA</u>	<u>3/28/16</u>	
15	SIGN <u>[Signature]</u> PRINT <u>Ellsworth Jackson IV</u>	RESIDENCE <u>623 Grayson Ave</u> CITY/TOWN <u>Richmond VA, 23220</u>	<u>3/28/16</u>	
16	SIGN <u>[Signature]</u> PRINT <u>JOE FOX</u>	RESIDENCE <u>215 HERMITAGE RD</u> CITY/TOWN <u>Richmond VA, 23220</u>	<u>3/28/16</u>	
17	SIGN <u>[Signature]</u> PRINT <u>DAMON C. COOK</u>	RESIDENCE <u>3437 McGUIRE DR.</u> CITY/TOWN <u>RVA 23224</u>	<u>3/28/16</u>	
18	SIGN <u>[Signature]</u> PRINT <u>JANAY BAKER</u>	RESIDENCE <u>225 PARK AVE</u> CITY/TOWN <u>Richmond, VA</u>	<u>3/28/16</u>	
19	SIGN <u>[Signature]</u> PRINT <u>MAREN SCHWARZ</u>	RESIDENCE <u>283 N PLUM ST</u> CITY/TOWN <u>Richmond, VA</u>	<u>3/28</u>	
20	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>1709 Grove</u> CITY/TOWN <u>Richmond</u>	<u>3/28</u>	
21	SIGN <u>[Signature]</u> PRINT <u>Nancy Kunkel</u>	RESIDENCE <u>1709 Grove</u> CITY/TOWN <u>Richmond</u>	<u>3/28</u>	

Commonwealth of Virginia

**- AFFIDAVIT -**

I, Alan Schintzus, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of VA; in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to 1 year.

FACE PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

Notary Public  
Commonwealth of Virginia  
Reg. #7327182  
My Commission Expires 11/30/2018

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 14th day of April, 2016, by Alan Schintzus

PRINT NAME OF PERSON CIRCULATING THE PETITION

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

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\* If not included in seal/stamp.

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a state-wide office

It is suggested that you file petitions in county or city to facilitate the processing of the filing. If you file the number of signatures by congressional district enter district no. (optional).

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)

Alan Schintzwe

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland ave

ENTER ABOVE, CITY/TOWN

Richmond VA 23222

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the (check only one)

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of NOV, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is neither a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA AND MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITION FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
C	1.	SIGN <i>Paul Lewis</i> PRINT PAUL LEWIS	RESIDENCE 1721 Grove Ave #1 CITY/TOWN Richmond, VA 23220	4/10/16	
R	2.	SIGN <i>Leah Page</i> PRINT Leah Page	RESIDENCE 1514 <sup>TEXES, INC</sup> <del>Richmond</del> <sup>VA</sup> CITY/TOWN Richmond	4/10/16	
	3.	SIGN <i>Haroon B. Smith</i> PRINT Haroon B. Smith	RESIDENCE <del>Richmond</del> CITY/TOWN <del>Richmond</del>		
C	4.	SIGN <i>Andrew Michaels</i> PRINT Andrew Michaels	RESIDENCE 2216 L. St., 5+ CITY/TOWN Richmond	4/10/16	
R	5.	SIGN <i>Kevin Onofri</i> PRINT Kevin Onofri	RESIDENCE 1411 W. ... CITY/TOWN Richmond	4/9/16	
R	6.	SIGN <i>Ellen ...</i> PRINT Ellen ...	RESIDENCE 414 ... CITY/TOWN RVA 23225	4/10/16	
R	7.	SIGN <i>Jack ...</i> PRINT Jack ...	RESIDENCE 3101 ... CITY/TOWN ...	4/10/16	
C	8.	SIGN <i>Stefan ...</i> PRINT Stefan ...	RESIDENCE 3910 ... CITY/TOWN Richmond, VA	4/10/16	
R	9.	SIGN <i>Harry ...</i> PRINT Harry ...	RESIDENCE 1475 ... CITY/TOWN Richmond, VA	4/10/16	
R	10.	SIGN <i>Brandon Simon</i> PRINT Brandon Simon	RESIDENCE 1872 ... CITY/TOWN Richmond, VA 23220	4/10/16	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schatzis OFFICE SOUGHT: Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>Natalie Snider</u> PRINT <u>Natalie Snider</u>	RESIDENCE <u>3011 E. Broad St, Bsm</u> CITY/TOWN <u>Richmond, VA 23223</u>	4-10-16	
12	SIGN <u>Heidi Rugg</u> PRINT <u>Heidi Rugg</u>	RESIDENCE <u>1811 Maple Shade Ln</u> CITY/TOWN <u>Richmond 23227</u>	4-10-16	
13	SIGN <u>Kate Lynn West-Smith</u> PRINT <u>Kate Lynn West-Smith</u>	RESIDENCE <u>2264 E Marshall</u> CITY/TOWN <u>Richmond, VA 23223</u>	4/10/16	
14	SIGN <u>Willa Piro</u> PRINT <u>Willa Piro</u>	RESIDENCE <u>1814 Lincoln Ave APT A</u> CITY/TOWN <u>Richmond, VA</u>	4/10/16	
15	SIGN <u>Shawn Stone</u> PRINT <u>Shawn Stone</u>	RESIDENCE <u>3108 E Marshall</u> CITY/TOWN <u>Richmond, VA 23223</u>	4/10/16	1
16	SIGN <u>Kiana Collazo</u> PRINT <u>Kiana Collazo</u>	RESIDENCE <u>2465 W Cary</u> CITY/TOWN <u>Richmond, VA</u>	4/10/16	
17	SIGN <u>John Elkins</u> PRINT <u>John Elkins</u>	RESIDENCE <u>2411 E 1st</u> CITY/TOWN <u>Richmond, VA</u>	4/10/16	
18	SIGN <u>John Elkins</u> PRINT <u>John Elkins</u>	RESIDENCE <u>514 W 29th</u> CITY/TOWN <u>Richmond, VA</u>	4/10/16	
19	SIGN <u>Amara Robinson</u> PRINT <u>Amara Robinson</u>	RESIDENCE <u>2817 Edgewood Ave</u> CITY/TOWN <u>Richmond, VA 23222</u>	4/10/16	
20	SIGN <u>Richard Thadabandah</u> PRINT <u>Richard Thadabandah</u>	RESIDENCE <u>2817 Edgewood</u> CITY/TOWN <u>Richmond, VA 23222</u>	4/10/16	
21	SIGN <u>Mike Stevens</u> PRINT <u>Mike Stevens</u>	RESIDENCE <u>6016 ALBEMARLE</u> CITY/TOWN <u>Richmond, VA 23226</u>	4/10/16	

Commonwealth of Virginia - AFFIDAVIT -

I, Alan Schatzis, swear or affirm that (i) my full residential address is 3321 Galloway in the State/Commonwealth of VA; in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

SIGNATURE OF PERSON CIRCULATING THE PETITION: Alan Schatzis

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE: VA

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER: 1023

STATE OF Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 16th day of April, 2016 by Alan Schatzis

PRINT NAME OF PERSON CIRCULATING THE PETITION: Alan Schatzis

NOTARY REGISTRATION NUMBER: 1023 DATE NOTARY COMMISSION EXPIRES: 11/30/2018

CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>[Signature]</u> PRINT <u>Kevin J. Clark</u>	RESIDENCE <u>308 W 30th</u> CITY/TOWN <u>Richmond</u>	5/20	
12	SIGN <u>[Signature]</u> PRINT <u>Michael Zorn</u>	RESIDENCE <u>308 W 30th</u> CITY/TOWN <u>RVA</u>	5/20	
13	SIGN <u>Casey Criddle</u> PRINT <u>Casey Criddle</u>	RESIDENCE <u>3111 Condie St</u> CITY/TOWN <u>Pulaski</u>	5/20	
14	SIGN <u>[Signature]</u> PRINT <u>Jason Creech</u>	RESIDENCE <u>3402 Stuart Ave</u> CITY/TOWN <u>RVA</u>	5/20	
15	SIGN <u>Nancy Costello</u> PRINT <u>Nancy Costello</u>	RESIDENCE <u>2517 Grove Ave</u> CITY/TOWN <u>RVA</u>	5/20	
16	SIGN <u>Walt Costello</u> PRINT <u>Walt Costello</u>	RESIDENCE <u>2511 Grove Ave</u> CITY/TOWN <u>RVA 23220</u>	5/20	
17	SIGN <u>Florence Breedlove</u> PRINT <u>Florence Breedlove</u>	RESIDENCE <u>2327 Hawthorne Ave #2</u> CITY/TOWN <u>Rich, VA 23225</u>	5/20/16	
18	SIGN <u>D.J. Ferguson</u> PRINT <u>D.J. Ferguson</u>	RESIDENCE <u>4230 W. Cavale</u> CITY/TOWN <u>Richmond 23230</u>	20 MAY 2016	
19	SIGN <u>Helene Kastenbaum</u> PRINT <u>Helene Kastenbaum</u>	RESIDENCE <u>109 Norfolk Dr</u> CITY/TOWN <u>Richmond VA 23228</u>	20/16	
20	SIGN <u>Jess Brooks</u> PRINT <u>Jess Brooks</u>	RESIDENCE <u>3406 W Grace St</u> CITY/TOWN <u>Richmond VA 23221</u>	5/20/16	
21	SIGN <u>Jenn Buch</u> PRINT <u>Jenn Buch</u>	RESIDENCE <u>3051 Gilliland Dr</u> CITY/TOWN <u>Richmond VA 23221</u>	5/20/16	

Commonwealth of Virginia

- AFFIDAVIT -

Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I understand the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May, 2016, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Priscilla Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

NOTARY REGISTRATION NUMBER DATE NOTARY COMMISSION EXPIRES

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Not included in seal stamp

SBE-506/521 REV 1.2013

060

Alan Schintzius

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, ZIP + 4  
23222

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidates)

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office

It is suggested that you file petitions in each county to facilitate the processing of the filing. If you file the number of signatures by congressional district, enter district no. \_\_\_\_\_ (optional)

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is hereby a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NO MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECUR NUMBER (optional)
1.	SIGN <u>John Williams</u> PRINT <u>John Williams</u>	RESIDENCE <u>1517 21st St</u> CITY/TOWN <u>Richmond VA 23223</u>	<u>5/16/16</u>	
2.	SIGN <u>William Smith</u> PRINT <u>William Smith</u>	RESIDENCE <u>1519 21st St</u> CITY/TOWN <u>Richmond VA 23220</u>	<u>5-16-16</u>	
3.	SIGN <u>Delores J. Barker</u> PRINT	RESIDENCE <u>2308 Land Ave</u> CITY/TOWN	<u>05/16/16</u>	
4.	SIGN <u>Rochelle Ramm</u> PRINT <u>Rochelle Ramm</u>	RESIDENCE <u>2308 Land Ave</u> CITY/TOWN <u>Richmond</u>	<u>5/16/16</u>	
5.	SIGN <u>Karen Tyler</u> PRINT <u>Karen Tyler</u>	RESIDENCE <u>2343 Land Ave</u> CITY/TOWN <u>Richmond Va</u>	<u>5/17/16</u>	
6.	SIGN <u>John H. H.</u> PRINT <u>John H. H.</u>	RESIDENCE <u>3961 Garland Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>5/16/16</u>	
7.	SIGN <u>Jonathan Davidson</u> PRINT <u>Jonathan Davidson</u>	RESIDENCE <u>8 C. 4th St S.</u> CITY/TOWN <u>Rich 23222</u>	<u>5/20/16</u>	
8.	SIGN <u>Mike Dulin</u> PRINT <u>Mike Dulin</u>	RESIDENCE <u>1607 Hill St</u> CITY/TOWN <u>Richmond VA 23224</u>	<u>5/20/16</u>	
9.	SIGN <u>Tristan Thomas</u> PRINT <u>Tristan Thomas</u>	RESIDENCE <u>1517 Land Ave</u> CITY/TOWN <u>Richmond VA 23227</u>	<u>5/20/16</u>	
10.	SIGN <u>Stephen J. Smith</u> PRINT <u>Stephen J. Smith</u>	RESIDENCE <u>1308 Barclay Bridge Rd</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>5/20/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]
5/20		RESIDENCE 300 W. 41ST ST CITY/TOWN RICHMOND, VA 23225	SIGN <u>Christopher Bedell</u> PRINT <u>Chris Bedell</u>
5/21		RESIDENCE 1206 LU 41TH ST CITY/TOWN RICHMOND, VA 23225	SIGN <u>X</u> (HANDICAPPED - UNABLE TO SIGN) PRINT <u>JAMES B BROCK</u> C. 63222 P.O.
5/21/16		RESIDENCE 1149 West Ave CITY/TOWN Richmond, VA 23225	SIGN <u>Julia W. Stewart</u> PRINT <u>Julia W. Stewart</u>
5/23/16		RESIDENCE 3211 Chamberlayne Rd CITY/TOWN Richmond, VA	SIGN <u>Frederick J. Walters</u> PRINT <u>Frederick J. Walters</u>
5/24/16		RESIDENCE 1250 North Chamberlayne Rd CITY/TOWN Richmond, VA 23224	SIGN <u>John F. [unclear]</u> PRINT <u>John F. [unclear]</u>
5/24/16		RESIDENCE 805 Old Nicholson St CITY/TOWN Richmond, VA 23224	SIGN <u>E. Martin Jewell</u> PRINT <u>E. Martin Jewell</u>
5/24		RESIDENCE Richmond VA CITY/TOWN 4381 Dandridge Rd	SIGN <u>Alison TART</u> PRINT <u>Alison TART</u>
5/24		RESIDENCE 675 Westover Hill CITY/TOWN Richmond VA 23225	SIGN <u>Sylvia C. Wood</u> PRINT <u>Sylvia C. Wood</u>
5/24		RESIDENCE 2909 Matisse Ln CITY/TOWN Richmond, VA 23224	SIGN <u>Cassandra Shaw</u> PRINT <u>Cassandra Shaw</u>
5/25/16		RESIDENCE 170364 25758 CITY/TOWN 23226	SIGN <u>John Johnson</u> PRINT <u>John Johnson</u>
5/25/16		RESIDENCE 1609 Rogers St CITY/TOWN 23223	SIGN <u>Nathan Benah</u> PRINT <u>Nathan Benah</u>

Commonwealth of Virginia - AFFIDAVIT.  
I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I understand the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

SIGNATURE OF PERSON CIRCULATING THE PETITION  
State of Virginia County/City of Richmond  
The foregoing instrument was subscribed and sworn before me this 31st day of May, 2016, by Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

NOTARY PUBLIC  
Priscilla Irene Clarke  
Commonwealth of Virginia  
Reg. #2032491  
DATE NOTARY COMMISSION EXPIRES 8/31/2019

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Alan Schintzius

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
3321 Garland Ave

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
Richmond Va 23222

ENTER ABOVE, CITY/TOWN  
MAYOR

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
**PETITION OF QUALIFIED  
 VOTERS**

(Must be filed with Declaration of Candidates)

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office

It is suggested that you file petitions in person to facilitate the processing of the filing. If you enter the number of signatures by congressional district no. \_\_\_\_\_ (optional).

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/his a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECUR NUMBER (SEE PAGE 2)
1.	SIGN <u>Kirsten Gray</u> PRINT <u>Kirsten Gray</u>	RESIDENCE <u>2305 East Broad St</u> CITY/TOWN <u>Richmond Va</u>	<u>5/20/16</u>	
2.	SIGN <u>Jenni Bachman</u> PRINT <u>Jenni Bachman</u>	RESIDENCE <u>1681 1/2 Cash St. AVE</u> CITY/TOWN <u>Richmond VA 23231</u>	<u>5/20/16</u>	
3.	SIGN <u>Jessie Lewis</u> PRINT <u>Jessie Lewis</u>	RESIDENCE <u>511 S. RINDST</u> CITY/TOWN <u>Richmond, VA 23220</u>	<u>5/20/16</u>	
4.	SIGN <u>Lisa Miller</u> PRINT <u>Lisa Miller</u>	RESIDENCE <u>4014 Mount Vernon</u> CITY/TOWN <u>Richmond Va. 23220</u>	<u>5/20/16</u>	
5.	SIGN <u>James Harris</u> PRINT <u>James Harris</u>	RESIDENCE <u>600 N 25th</u> CITY/TOWN <u>Richmond 23223</u>	<u>5/20/16</u>	
6.	SIGN <u>Howard Elford</u> PRINT <u>Howard Elford</u>	RESIDENCE <u>3313 Gloucester Rd</u> CITY/TOWN <u>Rich Va 23221</u>	<u>5/20/16</u>	
7.	SIGN <u>Roberta Elford</u> PRINT <u>Roberta Elford</u>	RESIDENCE <u>3313 Gloucester Rd</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/20/16</u>	
8.	SIGN <u>Michael J. Davis</u> PRINT <u>Michael J. Davis</u>	RESIDENCE <u>4402 W. Ferry Rd</u> CITY/TOWN <u>Richmond VA 23221</u>	<u>5/20/16</u>	
9.	SIGN <u>Natalie Snider</u> PRINT <u>Natalie Snider</u>	RESIDENCE <u>3011 E. Broad St, Bsm Apt</u> CITY/TOWN <u>Richmond, VA 23223</u>	<u>5/20/16</u>	
10.	SIGN <u>Natalie Snider</u> PRINT <u>Natalie Snider</u>	RESIDENCE <u>3002 E. Broad St A.</u> CITY/TOWN <u>Richmond, VA 23223</u>	<u>5/20/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>Jodi Taitelman</u> PRINT <u>jtaitel@vcu.edu</u>	RESIDENCE <u>3867 Fauquier Ave</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/28/16</u>	
12	SIGN <u>Bernice Baker</u> PRINT <u>BERNICE BAKER</u>	RESIDENCE <u>3225 Cliff Ave</u> CITY/TOWN <u>Rich, VA</u>	<u>6/28</u>	
13	SIGN <u>Coqui Masdonald</u> PRINT <u>COQUI MALDONADO</u>	RESIDENCE <u>218E Franklin</u> CITY/TOWN <u>23223 RICH VA</u>	<u>V</u>	
14	SIGN <u>Raj M</u> PRINT <u>Raj Muhammed</u>	RESIDENCE <u>3015 H. M. P. Blvd</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/29/16</u>	
15	SIGN <u>Saad El-Amin</u> PRINT <u>Saad El-Amin</u>	RESIDENCE <u>24 Overbrook Rd</u> CITY/TOWN <u>Richmond, VA</u>	<u>5/29/16</u>	
16	SIGN <u>W. Jerry Teachey</u> PRINT <u>W. Jerry Teachey</u>	RESIDENCE <u>2333 Floyd Ave</u> CITY/TOWN <u>Richmond VA</u>	<u>5/31</u>	
17	SIGN PRINT	RESIDENCE CITY/TOWN		
18	SIGN PRINT	RESIDENCE CITY/TOWN		
19	SIGN PRINT	RESIDENCE CITY/TOWN		
20	SIGN PRINT	RESIDENCE CITY/TOWN		
21	SIGN PRINT	RESIDENCE CITY/TOWN		

Commonwealth of Virginia

**AFFIDAVIT.**

I, Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I assented to the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

IF PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this

31st day of May

2016, by

Princetta Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

PRINT NAME OF PERSON CIRCULATING THE PETITION

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

IF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

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Alan Schintzius  
 ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]  
 3321 Garland Ave  
 ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE  
 Richmond Va 23222  
 ENTER ABOVE, CITY/TOWN  
 MAYOR  
 ENTER ABOVE, OFFICE SOUGHT  
 ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA  
 PETITION OF QUALIFIED  
 VOTERS

(Must be filed with Declaration of Candidacy)

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For a statewide office

it is suggested that you file petitions in a county to facilitate the processing of the filing. If you enter the number of signatures by congressional or other district no. (optional)

We, the qualified voters of the district in which the above candidate seeks nomination or election and of  
 Richmond signed hereunder on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the (check only one)

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is hereby a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECURITY NUMBER (OPTIONAL)
R 1.	SIGN <i>[Signature]</i> PRINT DULANEY HUNTER STEHL	RESIDENCE 3913 W BIRCH ST CITY/TOWN RICHMOND VA 23231	5/27/16	
R 2.	SIGN <i>[Signature]</i> PRINT REV. BOBBY TALEN	RESIDENCE 70 Sherman St CITY/TOWN Brooklyn NY	5/27/16	
R 3.	SIGN <i>[Signature]</i> PRINT Tristan Brennis	RESIDENCE 618 E Franklin St CITY/TOWN Richmond VA	5/27/16	
R 4.	SIGN <i>[Signature]</i> PRINT Matthew Wild	RESIDENCE 618 E Franklin St CITY/TOWN Richmond VA	5/27/16	
R 5.	SIGN <i>[Signature]</i> PRINT Emily Thornsberry	RESIDENCE 3103 Dill Ave CITY/TOWN Richmond VA	5/27/16	
R 6.	SIGN <i>[Signature]</i> PRINT Isaac Ramsey	RESIDENCE 2209 Rosewood CITY/TOWN Richmond VA	5/27/16	
R 7.	SIGN <i>[Signature]</i> PRINT James R. Kinter	RESIDENCE 1236 WARREN CITY/TOWN Richmond VA	5/27/16	
R 8.	SIGN <i>[Signature]</i> PRINT Daniel Ross Howard	RESIDENCE 29 W Jackson St CITY/TOWN Richmond VA	5/27/16	
R 9.	SIGN <i>[Signature]</i> PRINT DANIEL J. FINNEY	RESIDENCE 1111 Godwin St CITY/TOWN Richmond VA 23231	5/27/16	
R 10.	SIGN PRINT	RESIDENCE CITY/TOWN		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

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CONTINUED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: Mayor

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>[Signature]</u> PRINT <u>TESA BERNARD</u>	RESIDENCE <u>W 15th ST</u> CITY/TOWN <u>RVA</u>	<u>4/10/16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>Hannah Breun</u>	RESIDENCE <u>7030 W Gray St.</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/11/16</u>	<u>8</u>
13	SIGN <u>[Signature]</u> PRINT <u>Johnathan Fulle</u>	RESIDENCE <u>30 W 28th St.</u> CITY/TOWN <u>R. VA</u>	<u>4/25/16</u>	
14	SIGN <u>[Signature]</u> PRINT <u>Kathryn M. Roebert</u>	RESIDENCE <u>3206 Forest Hill</u> CITY/TOWN <u>Richmond</u>	<u>4/25/16</u>	
15	SIGN <u>[Signature]</u> PRINT <u>Kurt Stenlager</u>	RESIDENCE <u>4407 S 4th Ave. Dr</u> CITY/TOWN <u>RVA</u>	<u>4/25/16</u>	
16	SIGN <u>[Signature]</u> PRINT <u>Kathy Simpson</u>	RESIDENCE <u>3700 W. Tim Clun St</u> CITY/TOWN <u>RVA</u>	<u>4/25/16</u>	
17	SIGN <u>[Signature]</u> PRINT <u>Arthur L. Burton</u>	RESIDENCE <u>519 Catherine St</u> CITY/TOWN <u>Richmond, Va 23220</u>	<u>4/25/16</u>	
18	SIGN <u>[Signature]</u> PRINT <u>Keri Treadway</u>	RESIDENCE <u>3809 Cedar Grove Rd</u> CITY/TOWN <u>Richmond, VA 23225</u>	<u>4/25</u>	
19	SIGN <u>[Signature]</u> PRINT <u>Jackson Furl</u>	RESIDENCE <u>3414 Cooper Rd</u> CITY/TOWN <u>Richmond, VA</u>		<u>age 9</u>
20	SIGN <u>[Signature]</u> PRINT <u>Arnette V. Brown</u>	RESIDENCE <u>3428 S ST</u> CITY/TOWN <u>RICA VA</u>	<u>4/25/16</u>	
21	SIGN <u>[Signature]</u> PRINT <u>Jenny L. Lazzari</u>	RESIDENCE <u>214 W 11th Ave</u> CITY/TOWN <u>Rich 23221</u>	<u>4/25/16</u>	

Commonwealth of Virginia

**- AFFIDAVIT -**

Alan Schintzius, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

PLACE PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this 31st day of May, 2016, by Alan Schintzius

PRINT NAME OF PERSON CIRCULATING THE PETITION

T64252950

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

NOTARY SEAL/STAMP BELOW

NOTARY REGISTRATION NUMBER

DATE: NOTARY COMMISSION EXPIRES 5/31/2018

Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

\* If not included in seal/stamp.

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

it is suggested that you file petitions in counties to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: \_\_\_\_\_ (optional).

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)

Alan Schintens

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 gerland ave

ENTER ABOVE, CITY/TOWN

Rich Va

ENTER ABOVE, ZIP + 4

23222

ENTER ABOVE, OFFICE SOUGHT

MAYOR

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of \_\_\_\_\_ signed hereunder on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 8th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA NOT MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN ATTEMPT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
1.	SIGN	[Signature]	RESIDENCE 2119 Gailbell Ave	4/3/16	
	PRINT	EMMA MON	CITY/TOWN Richmond VA		
2.	SIGN	[Signature]	RESIDENCE 302 West 25	4/3/16	
	PRINT	Justin	CITY/TOWN RVA		
3.	SIGN	[Signature]	RESIDENCE 2913 E. GATES	4/3/16	
	PRINT	Bill MARTIN	CITY/TOWN RICHMOND VA		
4.	SIGN	[Signature]	RESIDENCE Henrico		
	PRINT	EDUARD GARCIA	3513 BARTLEY POND CT. 23233 CITY/TOWN		
5.	SIGN	[Signature]	RESIDENCE Church Hill	4/3/16	
	PRINT	Diane O'Neal	CITY/TOWN Richmond 23223		
6.	SIGN	[Signature]	RESIDENCE Shockoe Bottom	4/3/16	
	PRINT	Joshua Adams	CITY/TOWN Richmond 23219		
7.	SIGN	[Signature]	RESIDENCE Southside	4/3/16	
	PRINT	Dyane Chaus	CITY/TOWN Richmond VA 23224		
8.	SIGN	[Signature]	RESIDENCE 1516 E. ...	4/3/16	
	PRINT	Malika Skimp	CITY/TOWN Richmond		
9.	SIGN	[Signature]	RESIDENCE 10828 Dartmouth Ave	4/3/16	
	PRINT	Juliette McDermott	CITY/TOWN Richmond, VA 23226		
10.	SIGN	[Signature]	RESIDENCE 1516 WALKERS	4/3/16	
	PRINT	[Signature]	CITY/TOWN Richmond VA		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: \_\_\_\_\_ (optional).

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

Alan Schintz

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland Ave Richmond VA 23222

ENTER ABOVE, CITY/TOWN

MAJOR

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Richmond signed hereunder on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the 16th day of November, 2016, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA. NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
R	1.	SIGN <u>John M. Vassar</u> PRINT <u>John M. Vassar</u>	RESIDENCE <u>3714 Cary St. Rd</u> CITY/TOWN <u>Rich. Va 23221</u>	<u>4/25/16</u>	
R	2.	SIGN <u>Anita Holloman</u> PRINT <u>ANITA HOLLAMAN</u>	RESIDENCE <u>3108 Emslow Ave</u> CITY/TOWN <u>Richmond, VA 23222</u>	<u>4/25/16</u>	
	3.	SIGN <u>Theresa Brown</u> PRINT <u>Theresa Brown</u>	RESIDENCE <u>3130 Griffin Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>4/25/16</u>	
R	4.	SIGN <u>Rosa Allen</u> PRINT	RESIDENCE <u>1705 Windrow Ct</u> CITY/TOWN <u>Richmond, VA 23223</u>	<u>4/25/16</u>	
R	5.	SIGN <u>S. Hecker</u> PRINT <u>Samantha Hecker</u>	RESIDENCE <u>1701 Summit Ave Hill</u> CITY/TOWN <u>Richmond, VA 23130</u>	<u>4/25/16</u>	
R	6.	SIGN <u>Joel Black</u> PRINT <u>Joel Black</u>	RESIDENCE <u>306 W. 28th St</u> CITY/TOWN <u>RYA 23225</u>	<u>4/25/16</u>	
	7.	SIGN <u>Michelle Owen</u> PRINT <u>Michelle Owen</u>	RESIDENCE <u>1224 Rummage</u> CITY/TOWN <u>Richmond VA 23227</u>	<u>4/25/16</u>	
R	8.	SIGN <u>Phillip River</u> PRINT <u>Phillip River</u>	RESIDENCE CITY/TOWN <u>4601 W. 28th St</u>	<u>4-24/16</u>	
R	9.	SIGN <u>Katherine C. Terrell</u> PRINT <u>Katherine C. Terrell</u>	RESIDENCE <u>3414 Cooper Rd</u> CITY/TOWN <u>Richmond, VA 23225</u>	<u>4/25/16</u>	
R	10.	SIGN <u>Bernard Ham</u> PRINT <u>Bernard Ham</u>	RESIDENCE <u>609 E. Brookland</u> CITY/TOWN <u>Richmond VA 23223</u>	<u>4/25/16</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintzius OFFICE SOUGHT: Mayor

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
C 11	SIGN <u>William Edwards</u> PRINT <u>William Edwards</u>	RESIDENCE <u>3405 3rd Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>5/13/16</u>	
C 12	SIGN <u>Robert W. Edwards Jr.</u> PRINT <u>Robert W. Edwards Jr.</u>	RESIDENCE <u>3204 Midlothian Turnpike</u> CITY/TOWN <u>Apt P. Richmond, VA 23224</u>	<u>5/13/16</u>	
R 13	SIGN <u>Mike</u> PRINT <u>Mike Greene</u>	RESIDENCE <u>2422 Barton Ave</u> CITY/TOWN <u>Rich, VA 23222</u>	<u>5/14/16</u>	
C 14	SIGN <u>Kenneth L. Woss</u> PRINT <u>Kenneth L. Woss</u>	RESIDENCE <u>3000 CNGLESIDE DR</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>5/14/16</u>	
P 15	SIGN <u>Michael Harris</u> PRINT <u>Michael Harris</u>	RESIDENCE <u>3000 Delaware Ave</u> CITY/TOWN <u>Richmond VA 23222</u>	<u>5/14/16</u>	
I 16	SIGN <u>Jacques Snyder</u> PRINT <u>Jacques Snyder</u>	RESIDENCE <u>1902 - Porter</u> CITY/TOWN <u>Richmond, VA 23224</u>	<u>5/14/16</u>	
C 17	SIGN <u>Kimberly Jones</u> PRINT <u>Kimberly Jones</u>	RESIDENCE <u>3110 CAROLINA AVE</u> CITY/TOWN <u>Rich, VA 23222</u>	<u>5/14/16</u>	
C 18	SIGN <u>James M. Jones</u> PRINT <u>JAMES M. JONES</u>	RESIDENCE <u>210 1st St</u> CITY/TOWN <u>Rich VA</u>	<u>5/14/16</u>	
R 19	SIGN <u>James M. Jones</u> PRINT <u>James M. Jones</u>	RESIDENCE <u>357 Calthorpe St</u> CITY/TOWN <u>Richmond VA</u>	<u>5/14/16</u>	
A 20	SIGN <u>Robert I. Iritzius</u> PRINT <u>Robert I. Iritzius</u>	RESIDENCE <u>5204 Barton</u> CITY/TOWN <u>Richmond</u>	<u>5/14/16</u>	
P 21	SIGN <u>Demetria Evans</u> PRINT <u>Demetria Evans</u>	RESIDENCE <u>2309 Lumb Ave</u> CITY/TOWN <u>Richmond</u>	<u>5/14/16</u>	

Commonwealth of Virginia

- AFFIDAVIT -

164252950

I, Alan Schintzius, swear or affirm that (i) my full residential address is 321 Garland Ave in the State/Commonwealth of Virginia in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

CIRCULATOR'S DRIVER'S  
LICENSE NUMBER, IF  
APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
THE CIRCULATOR'S DRIVER'S  
LICENSE  
1193

CIRCULATOR'S LAST 4 DIGITS  
OF SOCIAL SECURITY  
NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of RichmondThe foregoing instrument was subscribed and sworn before me this 31st day of May, 2016, by

Alan Schintzius  
PRINT NAME OF PERSON CIRCULATING THE PETITION

Priscilla Irene Clarke  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7037191  
My Commission Expires 8/31/2018

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

NOTARY REGISTRATION NUMBER\*\*

DATE NOTARY COMMISSION EXPIRES

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\*\* If not included in seal/stamp.

SBE-506/521 REV 12/13

CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Alan Schintz OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (OPTIONAL)
11	SIGN <u>Carol A. Man</u> PRINT <u>Carol A. Man</u>	RESIDENCE <u>4022 Clinton Ave</u> CITY/TOWN <u>Richmond</u>	<u>4/3/16</u>	
12	SIGN <u>Albert Simmons</u> PRINT <u>ALBERT SIMMONS</u>	RESIDENCE <u>2222 ROSEWOOD AVE</u> CITY/TOWN <u>Richmond</u>	<u>4/3/16</u>	
13	SIGN <u>Robert Alexander</u> PRINT <u>ROBERT ALEXANDER</u>	RESIDENCE <u>1510 PALMYRA</u> CITY/TOWN <u>Richmond</u>	<u>4/3/16</u>	
14	SIGN <u>R. Bastow</u> PRINT <u>Richard Bastow</u>	RESIDENCE <u>719 Blandy Ave.</u> CITY/TOWN <u>Richmond VA</u>	<u>4/3/16</u>	
15	SIGN <u>BD Gilchrist</u> PRINT <u>BD GILCHRIST</u>	RESIDENCE <u>1203 Wilbur Pl</u> CITY/TOWN <u>Richmond VA</u>	<u>4/3/16</u>	
16	SIGN <u>Zoe Neale</u> PRINT <u>Zoe Neale</u>	RESIDENCE <u>808 Post View Dr</u> CITY/TOWN <u>Richmond VA</u>	<u>4/3/16</u>	
17	SIGN <u>Iga Kuzmierczak</u> PRINT <u>Iga Kuzmierczak</u>	RESIDENCE <u>801 W Franklin St</u> CITY/TOWN <u>Richmond VA</u>	<u>4/3/16</u>	
18	SIGN <u>Hannah Horstinger</u> PRINT <u>Hannah Horstinger</u>	RESIDENCE <u>801 W. Franklin St</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/3/16</u>	
19	SIGN <u>Adam Lavy</u> PRINT <u>Adam Lavy</u>	RESIDENCE <u>801 W Franklin St</u> CITY/TOWN <u>Richmond, VA</u>	<u>4/3/16</u>	
20	SIGN <u>Josua MacDaniel</u> PRINT <u>Josua MacDaniel</u>	RESIDENCE <u>3201 NORTH AVE</u> CITY/TOWN <u>Richmond</u>	<u>4/3/16</u>	
21	SIGN <u>Josua MacDaniel</u> PRINT <u>Josua MacDaniel</u>	RESIDENCE <u>3201 NORTH AVE</u> CITY/TOWN <u>Richmond</u>	<u>4/3/16</u>	

Commonwealth of Virginia

- AFFIDAVIT.

I, Alan Schintz, swear or affirm that (i) my full residential address is 3321 Garland Ave in the State/Commonwealth of Virginia; in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a crime punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

BE PHOTOGRAPHICALLY REPRODUCIBLE  
NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this  
day of April, 20 16, by  
Alan Schintz

PRINT NAME OF PERSON CIRCULATING THE PETITION

Lisa Anna Cosby  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. #7527182  
Commission Expires 11/30/2018

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\* DATE NOTARY COMMISSION EXPIRES\*

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Not included in seal/stamp.

SBE-506/521 REV 1.2013

COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

ENTER ABOVE, NAME OF CANDIDATE (SHOULD BE AS IT IS TO APPEAR ON BALLOT)

*Alene Schutrus*

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

*3321 Garland Ave*

ENTER ABOVE, CITY/TOWN

*Richmond Va*

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

*Mayor*

ENTER ABOVE, DISTRICT, IF APPLICABLE

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office

It is suggested that you file petitions in county or city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: \_\_\_\_\_ (optional).

We, the qualified voters of the district in which the above candidate seeks nomination or election and of \_\_\_\_\_ signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☐ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER (optional)
R	1.	SIGN <i>[Signature]</i> PRINT Gabrielle Schutrus	RESIDENCE <i>4611 Decatur Rd</i> CITY/TOWN <i>Richmond, VA</i>	<i>Apr 3/16</i>	
R	2.	SIGN <i>[Signature]</i> PRINT D Janet Ha	RESIDENCE <i>4503 New Kent Ave</i> CITY/TOWN <i>Richmond VA</i>	<i>Apr 3</i>	
R	3.	SIGN <i>[Signature]</i> PRINT CATHERINE OVERTON	RESIDENCE _____ CITY/TOWN _____	<i>4.3.16</i>	
R	4.	SIGN <i>[Signature]</i> PRINT Suzanne J. Keller	RESIDENCE <i>1430 Lurline Ave</i> CITY/TOWN <i>Richmond, VA 23224</i>	<i>April 3, 2016</i>	
R	5.	SIGN <i>[Signature]</i> PRINT BETH B MORRIS	RESIDENCE <i>3107 STUART</i> CITY/TOWN <i>Richmond</i>	<i>4/3/16</i>	
R	6.	SIGN <i>[Signature]</i> PRINT DIANE G. WESTBROOK	RESIDENCE <i>1513 Clarendon</i> CITY/TOWN <i>Richmond VA 23227</i>	<i>4/3/16</i>	
R	7.	SIGN <i>[Signature]</i> PRINT Anne E. Gray	RESIDENCE <i>Westminster</i> CITY/TOWN <i>Centerville</i>	<i>4/3/16</i>	
R	8.	SIGN <i>[Signature]</i> PRINT Wade K. Smith	RESIDENCE <i>3211 Noble Ave</i> CITY/TOWN <i>Richmond VA 23221</i>	<i>4/3/16</i>	
R	9.	SIGN <i>[Signature]</i> PRINT Diana Cole	RESIDENCE <i>1206 Poling Rd</i> CITY/TOWN <i>Richmond, VA 23227</i>	<i>4/3/16</i>	
R	10.	SIGN <i>[Signature]</i> PRINT Marcia Dickinson	RESIDENCE <i>3222 Rosewood</i> CITY/TOWN <i>Richmond, VA 23220</i>	<i>4/3/16</i>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT (

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215  
 CIRCULATED FROM REVERSE SIDE CANDIDATE NAME: Alan Schintz OFFICE SOUGHT: MAYOR

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
 SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
11	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
12	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
13	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
14	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
15	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
16	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
17	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
18	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
19	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
20	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	
21	SIGN <u>[Signature]</u> PRINT <u>[Name]</u>	RESIDENCE <u>[Address]</u> CITY/TOWN <u>[City]</u>	<u>4/10/16</u>	

Commonwealth of Virginia

**AFFIDAVIT.**

I, Alan Schintz, swear or affirm that (i) my full residential address is 3321 Garland in the State/Commonwealth of VA in the County/City/Town of Richmond; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

CIRCULATOR'S DRIVER'S  
 LICENSE NUMBER, IF  
 APPLICABLE  
VA

NAME OF STATE THAT ISSUED  
 THE CIRCULATOR'S DRIVER'S  
 LICENSE  
VA

CIRCULATOR'S LAST 4 DIGITS  
 OF SOCIAL SECURITY  
 NUMBER  
1122

NOT PHOTOGRAPHICALLY REPRODUCIBLE  
 NOTARY SEAL/STAMP BELOW

Like Anna Cooby  
 NOTARY PUBLIC  
 Commonwealth of Virginia  
 Reg. #7527182  
 Commission Expires 11/30/2018

SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Richmond

The foregoing instrument was subscribed and sworn before me this

10th day of April, 2016, by

Alan Schintz

PRINT NAME OF PERSON CIRCULATING THE PETITION

NOTARY PUBLIC OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER\*\* DATE NOTARY COMMISSION EXPIRES\*\*

Easy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate linking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without providing it. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing your social security number or part thereof.



COMMONWEALTH OF VIRGINIA  
PETITION OF QUALIFIED  
VOTERS

(Must be filed with Declaration of Candidacy)

When an election district includes more than one county or city, it is suggested that you use separate petition forms for qualified voters in each county or city to facilitate the processing of filing.

For a statewide office it is suggested that you file petitions in county to facilitate the processing of the filing. If you file the number of signatures by congressional district enter district no. \_\_\_\_\_ (optional).

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

Alan Schintz

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

3321 Garland Ave R. Va 23222

ENTER ABOVE, CITY/TOWN

MANASSAS

ENTER ABOVE, ZIP + 4

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of \_\_\_\_\_ signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

☒ General Election ☐ Special Election ☐ Democratic Primary ☐ Republican Primary

to be held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is herein a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.  
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITION FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECUR NUMBER (optional)
	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)			
R	1. SIGN <u>Mrs. Green</u> PRINT <u>Mrs. Green</u>	RESIDENCE <u>5071 32nd</u> CITY/TOWN <u>Richmond</u>	4/10/16	
R	2. SIGN <u>Melanie Sears</u> PRINT <u>Melanie Sears</u>	RESIDENCE <u>3369 Park Hvy</u> CITY/TOWN <u>Richmond</u>	4/10/16	
R	3. SIGN <u>Adelheid R. Lewis</u> PRINT <u>Adelheid R. Lewis</u>	RESIDENCE <u>1721 Grove Ave.</u> CITY/TOWN <u>Richmond, VA</u>	4/10/16	
C	4. SIGN <u>Datrice Jean</u> PRINT <u>DATRICE JEAN</u>	RESIDENCE <u>Richmond VA</u> CITY/TOWN <u>Richmond VA</u>	4/10/16	
C	5. SIGN <u>Emily Walker</u> PRINT <u>Emily Walker</u>	RESIDENCE <u>Richmond VA</u> CITY/TOWN <u>Richmond VA</u>	4/10/16	
R	6. SIGN <u>Andrea L. Driscoll</u> PRINT <u>Andrea L. Driscoll</u>	RESIDENCE <u>1114 1st St</u> CITY/TOWN <u>Richmond VA</u>	4/10/16	
P	7. SIGN <u>Oliver B. Miller</u> PRINT <u>Oliver B. Miller</u>	RESIDENCE <u>3004 Converse St</u> CITY/TOWN <u>Richmond VA</u>	4/10/16	
R	8. SIGN <u>Erin Bishop</u> PRINT <u>Erin Bishop</u>	RESIDENCE <u>5709 Dunwoody</u> CITY/TOWN <u>Richmond VA</u>	4/10/16	
C	9. SIGN <u>Eryn Green</u> PRINT <u>Eryn Green</u>	RESIDENCE <u>612 W 28th</u> CITY/TOWN <u>Richmond</u>	4/10/16	
R	10. SIGN <u>Cathy Cowan</u> PRINT <u>Cathy Cowan</u>	RESIDENCE <u>3101 Tidewater</u> CITY/TOWN <u>Richmond VA</u>	4/10/2016	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE

\* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing social security number or part thereof.